

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10797087

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|----------------------|--------------------------|
| TOTAL CLAIMS | <u>37</u> | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | <u>37</u> minus 20 = | * <u>17</u> |
| INDEPENDENT CLAIMS | <u>3</u> minus 3 = | * <u>0</u> |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

| | |
|-----------|--------|
| RATE | FEE |
| BASIC FEE | 385.00 |
| XS 9= | |
| X43= | |
| +145= | |
| TOTAL | |

| | |
|-----------|-------------|
| RATE | FEE |
| BASIC FEE | 770.00 |
| XS18= | <u>306</u> |
| X86= | |
| +290= | <u>290</u> |
| TOTAL | <u>1366</u> |

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | Minus | | |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/> | | | |

SMALL ENTITY

OR

OTHER THAN
OR SMALL ENTITY

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| X43= | |
| +145= | |
| TOTAL ADDT. FEE | |

| | |
|--------------------|------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$18= | |
| X86= | |
| +290= | |
| TOTAL ADDT. FEE | |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | Minus | | |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/> | | | |

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

(Column 1) (Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| | Total | Minus | | |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/> | | | |

RATE

ADDI-
TIONAL
FEE

RATE

ADDI-
TIONAL
FEE

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.